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DECL	Attorney Do	cket Number	ORT-1587						
	AND OF ATTORNEY		First Named		Stephen A. Ulrich et al.				
	ITY OR DESIGN APPLICATION			COMPLE	TE IF KNOWN				
	CFR 1.63)		Application Number						
Declaration Submitted with Initial Filing	Declaration Subr	rcharge	Filing Date						
j	(37 CFR 1.16(e))		Group Art U	nit					
			Examiner Na	ame					
As a below named invento	r, I hereby declare that	t:							
My residence, mailing address, and citizenship are as stated below next to my name.  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
TASTE MASKED LIQUID PHARMACEUTICAL FORMULATIONS (Title of the Invention)									
the specification of which									
is attached hereto									
OR									
was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)									
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for paten or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country		Filing Date D/YYYY)	Priority Not Claime	cd Certified Copy Attached? YES NO				
	pation numbers are liste		lomantol priori	D data shoot B	TO/SB/02B attached hereto:				

DECLARATION - Utility or Design Patent Application								
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.								
Application Number(s) 60/273,472	Filing Date (MM/DD/YYYY)  March 5, 2001	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.						
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:								
Application Serial No.	Filing Date	Status						
		Patented Patented Patented						
I hereby appoint:								
Practitioners at Customer Number	Place Customer Number Bar Code Label Here							
Practitioner(s) named below:  Name  Registration Number								
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.								
Address all telephone calls to Ellen Ciambrone Coletti at telephone number (732) 524-2359.								
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR:	NAME OF SOLE OR FIRST INVENTOR:   A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any]) Stephen A.		Family Name or Surname Ulrich						
Inventor's Signature		····		Date				
Residence: City Cherry Hill	State NJ		Count	ry USA	<b>Citizenship</b> USA			
Mailing Address 116 Old Carriage Road								
City Cherry Hill			<b>ZIP</b> 0	8034	Country USA			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SECOND INVENTOR:	□Аре	etition has b	been fil	ed for this unsigne	ed inventor			
Given Name (first and middle [if any]) Karen R.	Family Name or Surname Zimm							
Inventor's Signature				Date				
Residence: City Stockton	State NJ		Count	ry USA	Citizenship USA			
Mailing Address 68 Bowne Station Road								
City Stockton			ZIP 0	8559	Country USA			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF THIRD INVENTOR:	A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])			Family Name or Surname					
Inventor's Signature				Date				
Residence: City	State		Count	ry	Citizenship			
Mailing Address								
City State		ZIP			Country			